U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

SECT	ON A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE	
A1. Building Owner's Name	Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and	or Bldg. No.) or RO. Route and Box No.	Company NAIC Number:	
City Zuhmons Hele	State A.	ZIP Code 3/324	
A3. Property Description (Lot and Block Numbers, Tax Parcel	Number, Legal Description, etc.) CD PLANTATION,		
A4. Building Use (e.g., Residential, Non-Residential, Addition A5. Latitude/Longitude: Lat. 1131, 92285	Long. WO81, 28264 Horizont	al Datum: NAD 1927 NAD 1983	
A6. Attach at least 2 photographs of the building if the Certi A7. Building Diagram Number	ficate is being used to obtain flood insurance.		
A8. For a building with a crawlspace or enclosure(s):	A9. For a building with an		
a) Square footage of crawlspace or enclosure(s) b) No. of permanent flood openings in the crawlspace or	sq ft a) Square footage of	attached garage sq ft nent flood openings in the attached garage	
enclosure(s) within 1.0 foot above adjacent grade	within 1.0 foot abo	ove adjacent grade	
c) Total net area of flood openings in A8.b d) Engineered flood openings? Yes	c) Total net area of fl		
The state of the s	D INSURANCE RATE MAP (FIRM) INFORMAT		
B1. NFIP Community Name, & Community Number 1300	18 B2. County Name BRYAN	B3. State	
B4. Map/Panel Number B5. Suffix B6. FIRM Index D	Date B7. FIRM Panel Effective B8. Flood Zon Revised Date	e(s) B9. Base Flood Elevation(s) (Zone A0, use base flood depth)	
13029C0291 C 3-2-09	3-2-09 AE	13	
B10. Indicate the source of the Base Flood Elevation (BFE) da	ta or base flood depth entered in Item B9:	salidagie Valora ara Sant T	
B11. Indicate elevation datum used for BFE in Item B9:	NGVD 1929 NAVD 1988 Other/Sour	rce:	
B12. Is the building located in a Coastal Barrier Resources Sy		? Yes No	
Designation Date:/ CBRS			
SECTION C - BUILDIN	G ELEVATION INFORMATION (SURVEY REQU		
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when construction		4 Finished Construction	
C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-		/AH, AR/AO, Complete Items	
C2.a-h below according to the building diagram specified	I in Item A7. In Puerto Rico only, enter meters.	1	
Benchmark Utilized: EGPS WETWO	The state of the s		
Indicate elevation datum used for the elevations in items Datum used for building elevations must be the same as	that used for the RFF		
a) Top of bottom floor (including basement, crawlspace, and a second secon	Check the	measurement used.	
b) Top of the next higher floor	30.0		
c) Bottom of the lowest horizontal structural member (V			
d) Attached garage (top of slab)	_NA □fe	eet meters	
 e) Lowest elevation of machinery or equipment servicing (Describe type of equipment and location in Comment 	the building 17.0	eet meters	
f) Lowest adjacent (finished) grade next to building (LAG		eet meters	
g) Highest adjacent (finished) grade next to building (HAG)			
 h) Lowest adjacent grade at lowest elevation of deck or structural support 	stairs, including 16.9	eet meters	
SECTION D - SURVE	YOR, ENGINEER, OR ARCHITECT CERTIFICA	TION	
This certification is to be signed and sealed by a land surveyor.	engineer, or architect authorized by law to certify ele-		
information. I certify that the information on this Certificate repre I understand that any false statement may be punishable by fine	esents my best efforts to interpret the data available.	a character a new color	
	Were latitude and longitude in Section A provided by licensed land surveyor? ☐ Yes ☐ No		
Certifier's Name C. LANKA La.	License Number	PLACE SEAL	
PARSIDENT	Company Name Corus Schwening, In	K HERE	
Address P.D. Bux 92	Erchmans Hu State 64. ZIF Code	324	
Signature	Date 3-13-14 Telephone 9/2-796-4	-366	

	spaces, copy the correspon	ding Information from Section	Α		FOR INCURATION A
Building Street Address (including Apt., Unit, Suite, and/or Bldg, No.) or PO. Route and Box No.				FOR INSURANCE COMPANY US Policy Number:	
City	HUW DRIVE	State / . 7	712.0.1		
Richmon	office.	64.	ZIP Code 3/32	4	Company NAIC Number:
Conv both sides of thi	SECTION D - SURV	EYOR, ENGINEER, OR AR	CHITECT CERTIF	CATION (CO	NTINUED)
		community official, (2) insurance			owner.
GECTION F	7-AS-GAMMIN	GPS 72. 980	TION C.C.	2-0 7	WO DIGNOE A
HORES LA	AT 17.0 AND	1 AT 17.1.	e de la caractería de la c	<i></i>	and the second second
Signature					
		3	Date - 13 - 14	Life Land	
SECTION E -B	UILDING ELEVATION INF	ORMATION (SURVEY NOT	required) for	ZONE AO	AND ZONE A (WITHOUT B
For Zones AU and A (W	ithout BFE), complete Items F	1–E5. If the Certificate is inteneck the measurement used. In	adad to summent - 1 au	144 15115 5	request, complete Sections A,
E1. Provide elevation in grade (HAG) and th	nformation for the following an e lowest adjacent grade (LAG)	d check the appropriate boxes	to show whether the	e elevation is a	bove or below the highest adja
a) Top of bottom flo	oor (including basement, crawl	space, or enclosure) is		eet meters	above or below the I
b) Top of bottom flo	oor (including basement, crawl	space, or enclosure) is	🗆 f	eet 🗆 meters	Dahaya ar Distant
E2. For Building Diagram	ns 6-9 with permanent flood	openings provided in Section A	Items 8 and/or 9 (s	ee pages 8-9	of Instructions).
the next nigher noo	r (elevation C2.b in the diagra	ms) of the building is		eet meters	
E3. Attached garage (to				eet meters	
E4. Top of platform of n	nachinery and/or equipment s	ervicing the building is	□ fr	eet 🗆 meters	Debaya or Dist.
ordinance? Yes	flood depth number is availab No Unknown. The I	le, is the top of the bottom floo ocal official must certify this in	or elevated in accord iformation in Section	ance with the c	community's floodplain manage
-	SECTION F - PROPE	RTY OWNER (OR OWNER	'S DEDDESENTAT	IVE) CEDTIE	ICATION /
he property owner or o cone AO must sign here	wner's authorized representat	tive who completes Sections A. A, B, and E are correct to the i	D 151 -		MA-issued or community-issued
roperty Owner or Owner	er's Authorized Representative	's Name	and a my renowicing	=	A Company of the Comp
ddress	Ser	C	City	State	ZIP Code
ignature	٠ ﴿ ر	an vana viso and anace D	Pate	Telepl	hone
comments		2:0\00000000000000000000000000000			
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	CEATI		cular e care	10 TO ST.	Check here if attachm
	SECIII	ON G - COMMUNITY INFO	DRMATION (OPTIC	ONAL)	
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	authorized by law or ordinance to cate. Complete the applicable	to administer the community's fi item(s) and sign below. Check t	ule measurement use	nt ordinance car	G10 In Puerto Dica anhi anter e
1. The information who is authorize	authorized by law or ordinance to cate. Complete the applicable in Section C was taken from ed by law to certify elevation is	to administer the community's fi item(s) and sign below. Check to other documentation that has information. (Indicate the sour	s been signed and s	nt ordinance car ed in Items G8-	G10. In Puerto Rico only, enter ransed surveyor, engineer, or are
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☐ Check here if attachments.

Building Photographs

See Instructions for Item A6.

For Insurance Company Use:

Policy Number

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 877 Dublin Drive

Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.

Side

City Richmond Hill State GA ZIP Code 31324







Side

Front